

MULTIPLE DEPENDENT CLAIM
FEE COMPUTATION SHEET
(FOR USE WITH FORM PTO-875)

SERIAL NO.

10/527786

FILING DATE

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1 ST AMENDMENT		AFTER 2 ND AMENDMENT			AS FILED		AFTER 1 ST AMENDMENT		AFTER 2 ND AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.		IND.	DEP.	IND.	DEP.	IND.	DEP.
1			/				51						
2				/			52						
3					/		53						
4						/	54						
5							55						
6			/				56						
7			/				57						
8				/			58						
9					/		59						
10						/	60						
11							61						
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23			/				73						
24				/			74						
25					/		75						
26			/				76						
27						/	77						
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35							85						
36							86						
37							87						
38							88						
39							89						
40							90						
41							91						
42			/				92						
43							93						
44							94						
45							95						
46							96						
47							97						
48							98						
49							99						
50							100						
TOTAL IND.			↓	7		↓							
TOTAL DEP.			↔	34		↔							
TOTAL CLAIMS				41									